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CONFIRMATION NO. 6135

|  |   |  |                               |   |                                |
|--|---|--|-------------------------------|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/541,093   | <b>FILING or 371(c) DATE</b><br>06/29/2005<br><b>RULE</b>   | <b>CLASS</b><br>359  | <b>GROUP ART UNIT</b><br>2629 | <b>ATTORNEY DOCKET NO.</b><br>1248-0793PUS1   |                                |
| <b>APPLICANTS</b><br>Toshiyuki Fujine, Shiyo-gun, JAPAN;<br>Takashi Yoshii, Chiba-shi, JAPAN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP04/05099 04/08/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2003-391376 11/20/2003<br>JAPAN 2004-079238 03/18/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> |   |  |                               |   |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/ROBERT R RAINEY/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br><b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWINGS</b><br>21  | <b>TOTAL CLAIMS</b><br>24   | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>BIRCH STEWART KOLASCH & BIRCH<br>PO BOX 747<br>FALLS CHURCH, VA 22040-0747<br>UNITED STATES  |   |  |                               |   |                                |
| <b>TITLE</b><br>Liquid crystal display device, liquid crystal display control method, program thereof, and recording medium  |   |  |                               |   |                                |
| <b>FILING FEE RECEIVED</b><br>1300   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                |